SECRI

MEMORANDOM FOR 8

Chief, Finance Division

ATTENTION

Monotary Branch

BULTECT

25X1

Distursement by Treasury Check

It is kindly requested that a V. S. Treasury Check be drawn in favor of the company listed berounder in the amount stated, which will be applicable to the contract or agreement shows. The postract muster and invoice identification must

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Centrast Haber: 12-2101 Invoice Finber: 14-2101 urs No. 12 and No. 15

Career to be Deted: 3

- Fertinent documentation in connection with this classified transaction which has not been included in comptrollers instruction No. 32 (Notice 20-56, after exproval by the DCI 15 December 1956), is on file in the Office of the Project Comptroller.
- The payment requested is based on progress made by the contractor to date and should be processed against Central Ledger Account to. 138, titled "Dishersements of Appropriated Funds Chargooble to Confidential Funds Allotnosts -"The Allotment Symbol explicable to this request is and the amount is chargeable to General Leiger Account Fe. 600.1.
- The check should be dated as stated in paragraph 1 and mailed in the ettaded relf-addressed exvelope. If no envelope is attached, the undersipped should be contacted on extension then payment is ready for disposition.

Distribution:

Original & 1 - Addressee

- Contract TE-2191 (Finance)

4 - DIGEOPONY (Contracts)

HEBruce/aer:30 December 1957

Authorized Certifying Officer 30 December 1957

SECRET

25X1

(Amended February 20, 1969) U. S. (Department, bureau, or establishment) Voucher prepared at (Give place and date) THE UNITED STATES, Dr., Payee's Account No. To Edgerton, Germeshausen & Grier, Inc. (Payee) (Address) (Olty) (State) (City) (State) (Enter description, item number of contract or federal supply or Service or Servic	SERVICES OTHER THAN PERSONAL Page 1 of 1	U. S. (Department, bureau, or establishments) Voucher prepared at (Citre place and date) THE UNITED STATES, Dr., Payer's Account No To Edgerton, Germeshausen & Grier, Inc. (Payers) Les Verras, Nevada (Citre) (Citre) (State) No. and Date of Date of Delivery or Services (Enter description, item number of scentract or Federal supply achedule, and other information demond necessary) Bu. Vo. #12 Bu. Vo. #13 Bu. Vo. #13 Bu. Vo. #13 PAYMENT: Complete Bu. Vo. #13 Bu. Vo. #13 Bu. Vo. #16 Bu.	PAID BY Voucher prepared at Core place and data) PAID BY	Sar orm 1	nitized No. 1034 scribed by	Copy -Kevised	Αp	proved	d for F	Releas	e 201	0/06/08	: CIA-F	RDP65-	-00523 <u>R</u>	00010	018001	4-8	
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	Date	Check Nodated, 19, for \$	Paid by {	ash. \$	\$		(on				., 19	Payee			(tavo	or or payee r	named above.	
	Date		*When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example:																

16-22900-5

Standard I Sanitized Copy Approved for Release 2010/06/08 : CIA-RDP65-00523R000100180014-8 Form prescribed by Comptroller General, U. S. September 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) (Amended February 20, 1952) LIC VOUCHER FOR PURCHASES AND ERVICES OTHER THAN PERSONAL Bu. Vou. No. .. PAID BY (Department, bureau, or establishment) Voucher prepared at (Give place and date) THE UNITED STATES, Dr., Payee's Account No. _____ ARTICLES OR SERVICES UNIT PRICE AMOUNT (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) No. and Date of Date of Delivery Order or Service OUANTITY Cost Per Dollars Cts. Discount Terms PAYMENT: Complete Partial Final Use continuation sheet(s) if necessary Shipped from Weight Government B/L No. Total (Payee must NOT use this space) I certify that the above bill is correct and just and that payment has not been received. (Sign original only) Amount verified; correct for _____ Per (Signature or initials) Date Invoice Rec'd. Contract No. Pursuant to authority vested in me, I certify that this account is correct and proper for payment. (Authorized Certifying Officer) SIGN ORIGINAL ONLY THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional) Check No. ______ on Treasurer of the United States in Paid by (favor of payee named above. Payee *When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be. †If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$_______", and over his officir 14:10

3-22900-5 Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8

<i>U. S.</i>	Contractin	officer (Department	nt, bureau, or establishment)		. <i>F</i>	- [PA	ID BY
			(Give place and date)				CARC	2282
							Ç	
THE UNITED			yee's Account No				COPY	/ OF 3
10	lgerton, Gei	rmeshausen ä	Grier, Inc. (Payee)	••••		-		
	DA)	lress)	(City)	(Stat	e)	-		
No. and Date of Order	Date of Delivery or Service	(Enter descripti schedule, : Discount Terms	ARTICLES OR SERVICE on, item number of contra and other information deen	t or Federal supp	QUANTITY	Cost	PRICE	AMOU
			ng 30 Hovember	1957				
				771				1 C O
		Direct Lab	or & Services					\$ 6,64
		Materials Travel	G Bervices					17
PAYMENT:		Freight &	Express					6i
Complete		Other Dire	ect Charges					19
Partial		Burden						5,12
Final		Overhead U	se continuation sheet(s) if ne	essary				1,36
Shipped from	t		Weight	Government B/L	No. (Payee must NO	T 4L!	Total	\$16,51
I certify that the	above bill is correct	t and just and that p	payment has not been receiv		(Payee must NO			
		(Sign original on	y)		/merences		·	
		.)	_					-
Date 12/24/	57 *Pavee Ed	gerton. Ger	meshausen & Grie	r, Inc.	Amount verified;	t		16516
P			Controlle		Amount verified; (Signature or init			
Contract No.	rancer cold	Date	14/26/57 Req. No.		Date	I	nvoice Rec	'd.
Pursuant to auth	prity vested in me,	I certify that this acc	ount is correct and proper f	or payment.				
		•		-				STAT
			SIGN	. 1	(Authori	zed Certify	ing Officer)	
		***************************************	ORIGINAL ONLY	Title				
Ву				Date				
•								i.
•	THE REVERSE OF T		TED WHEN PURCHASES ARE MADE	OR SERVICES SECURE	ED WITHOUT WRITTEN	AGREEMENT	IN ANY FORM	
•	THE REVERSE OF TH	HIS FORM MUST BE EXECU	TED WHEN PURCHASES ARE MADE					

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8 LEA! Standard Form No. 1085—Revised Form prescribed by Comptroller General, U. S. September 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) Services Other Than Personal

72823 1 3

CONTINUATION SHEET

U. S. Contracting Officer	Sheet No. 1 of Bureau Voucher No. 12
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o. and Date	Date of Delivery	I	TICLES OR SERV		QUAN- TITY	UNIT	PRICE	AMOUN	1T
of Order	or Service	and other	umber of contract information deeme	or Federal supply schedule, d necessary)	TITY	Cost	Per	Dollars	c
		Direct Labor							
ļ		Week ending	11/3/57	862.36					
		11 71	11/10/57 11/17/57 11/24/57 11/30/57	770.89					
		fi ti	11/17/57	934.65					
		11 11	11/24/57	1,278.40			•		
		Month "	11/30/57	2,800.60					
		Total Direct		6,646.90 (ŀ				
		*Materials & S Travel	ervices	2,396.32 × 174.76 -]	Ly oit	22		
		Freight & Exp	WASS.	617.03	-	104	.)		
		Other Direct		193.90	ند د	(4)			
		*Burden	Ondr 500	5,123.45	- 10%)			
		Total Direct	Costs	23-23-17	, 0 0			\$ 15,15	d.
		Overhead						-,,-,	Τ
		Total Direct	Costs 6 95					1,36	₫,
								\$ 16,51	φ,
								İ	
		*Materials & S	The state of the latest the state of the sta						
		P.O.Mo.	Check No.	Vendor		~			
ł		21072	2845	Lambda Electr				61	
		21055 Petty Cash	2751 2738	Lee Office Eq	ulpmen	· C		27	φ. 2.
		reddy Cash	2738	Pavell Electr	ie Sur	20137			1
ľ		11 11	2738	Las Vegas Aut	_				2
		21033	2794	The Home Lumb	1	3			₫.
		21113	2743	City Janitor					\$.
]		21086	2839	if t				1	2.
1		21081	2752	Pavell Electr	ic			2	₿,
				EG&G Inv. Ite					3,
		21129	2791	City Janitor				1	8.
		21141	2795	Las Vegas Blu				3	1.
		21117	2836	American Pamo	or Inc	•		21	
		21117	2836 281:14		074 (00			14	
İ		21112 21095	2849	The Home Lumb	i				\$ \$.
		21090	2949 2770	McKinley Equi Pavell Electr	_	- 1		20	7
ļ		21116	2767	Las Vegas Blu		1		20	<u>]</u> :
		21116	2767	tt tt	11			,	;
		21033	59M;	Home Lumber (0.				ţ.
ļ		Petty Cash	2822	Supper Money					Ι.
		11 11	2822	Strip Drug St	ore]	╡.
		21160	2809	Ducommun Meta	ls & S	upply			φ.
		21118	2817	Pavell Electr					≱∙
İ		21065	2813	Las Vegas Coi	1	1		l	φ.
		21161	2815	Lee Office Ed	uiomen	:t			₿.

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8 Form prescribed by Comptroller General, U. S. September 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) Services Other Theorem Services Other The

CONTINUATION SHEET

	Sheet No	.2 of	Bureau	Voucher	No.	12
(Department, bureau, or establishment)						

No and Date	Date of	ARTICLES OR SERVICES		UAN-	UNIT	PRICE	AMOUN	Γ
of Order	Delivery or Service	(Enter description, item number of contract or Federal supportant and other information deemed necessary)	oly schedule,	TITY	Cost	Per	Dollars	Cts.
No. and Date of Order	Date of Delivery or Service	*Materials & Services P.O. No. Check No. Vendor 21135 2811 Electron 21164 2821 Vegas Pl 21146 2843 Fitzgers 21120 2846 Las Vega 21175 2835 Alamo Ar 21049 2835	nic Supply hoto Servi ald Electr	ce ic Ir		Per	71 31 10 150 124 211	.25 .15 .33 .00

Con Dog No	General, U. S. oer 7, 1950 51, Supp. No. 11) bruary 20, 1952)	Approved for R	VICES OT	HER THAN	PERSON	IAL	Bu	. Vou. No	1	3	
•		cting Office	r , bureau, or esta	blishment)					PAI	D BY	
oucher prep	ared at					 -	·	. ,	والمتنادرة فبالاستعادات المتاد		***
ie united s				nt No				A PORTER AND	1445 2	2824	VI DESCRIPTION OF THE PROPERTY
oEd	igerton, Ge	rmeshausen &	Grier,	Inc.				- Special	COPY .	Or _3	and the second
		iress)	(City)		(State	 e)		_			
		(Enter description	ARTICLES O	R SERVICES or of contract or F	ederal suppl		QUANTITY	רוחט	PRICE	AMOUN	ΙΤ
lo. and Date of Order	Date of Delivery or Service	schedule, a Discount Terms	nd other inforn	nation deemed ne	cessary)		QUANTITY	Cost	Per	Dollars	Cta
		Period endi	ing 30 No	vember 195	7					\$ 1,65	1.6
AYMENT: Complete Partial Final		Us	e continuation sl	neet(s) if necessary	,						
ipped from		to	Weight		rnment B/L		e must NO	T use thi	Total		_ -
certify that the	above bill is correct	ct and just and that p	ayment has not	been received.	D					. ,	
		(Sign original only	y)								
12/24/	57/ *Pavee Ed.	gerton, Germ	eshausen.	& Grier,	[- 1
		<u> </u>	ke cepffigate is mad	le by payee on attached bil	l or bills)						
ontrac			/26/57	Req. No.			ate		Invoice Rec		
	TE-2191 ority vested in me,	I certify that this acc	ount is correct	and proper for pay	ment.					STAT	
							(Authori	zed Certif	ving Officer)		
			0.01	IGN			•				
у			0	NLY	_						
		THIS FORM MUST BE EXECU								 I	,=
itle		IIID I OWN MODE DE DUEGO									
itle		JNTING CLASSIFICA	TION (Appen	ristian Symbol m	ust be show	n: oth	er classifica	tion opti	onal)		

"John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the annoving officer will sign on the line below "Approved for \$_______", and

over his of Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8 21

Standard Form No. 1035 - Revised

Form Prescribed by

Comptroller General, U. S.

September 7, 1950

(Gen. Reg. No. 51, Supp. No. 11)

Services Other Than Posses

22824

CONTINUATION SHEET

I D-4-	Date of	ARTICLES OR SERVICES		OHAN	UNIT	PRICE	AMOUN	T
o. and Date of Order	Delivery or Service	(Enter description, item number of contract or Federal supply so and other information deemed necessary)	chedule,	QUAN- TITY	Cost	Per	Dollars	c
		Total Costs billed through 30 Novemb including Bu. Voucher No. 12	er 195	7			124,84	8.
		Fixed Fee Earned (10% of above)					12,48	4.
		Fixed Fee previously billed					10,83	3.
		Amount of this Voucher				Ç	1,65	
	•				•			
		"I certify that the Fixed Fee claimed that it is proportionate to the prog	is co ress m	rrect ade or	and ju	st; ar Contrac	d t."	
		edgerton, germeshausen & Grieb	R, INC	•				
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		ro.	ller					
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U. S. GOVERNMENT PRINTING OFFICE 16-62666-1

VOUCHER #13